

## Downtown Employee Parking Renewal – Multiple Vehicles (7 per form)

## **Renewal Information**

- Please make sure to fill out a renewal form when you receive an email notification.
- Renewal forms are located at Hudson Police Department (101 Vine Street) or on the City of Hudson Website under "Permits and Forms"

| Business Name:        |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
|-----------------------|--|---------|--|---|-------------|----|--|---|---|---|-----------|-----------|--|--|--|
| Manager Name:         |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Signature of Manager: |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Name Li    |  |         |  | ense Plate Number                                   |             |    | Employee's Phone #                     |   |   |   |           |           |  |  |  |
|                       |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Email      |  |         |  | Would you like to receive the monthly Parking Ne    |             |    |  |   |   |   | Nev       | vsletter? |  |  |  |
|                       |  |         |  | Yes 🗆 No  |             |    |  |   |   |   |           |           |  |  |  |
| Permit Type           |  |         |  | If Monthly, how many months?                        |             |    |  |   |   |   |           |           |  |  |  |
| Annual                |  | Monthly |  | 1 2 3 4 5 6 7 8                                     |             |    |  |   |   |   |           |           |  |  |  |
|                       |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Name L     |  |         |  | ense Plate Number                                   |             |    | Employee's Phone #                     |   |   |   |           |           |  |  |  |
|                       |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Email      |  |         |  | Would you like to receive the monthly Parking Newsl |             |    |  |   |   |   | vsletter? |           |  |  |  |
|                       |  |         |  | Yes   | Yes 🗆 No    |    |  |   |   |   |           |           |  |  |  |
| Permit Type           |  |         |  | If Monthly, how many months?                        |             |    |  |   |   |   |           |           |  |  |  |
| Annual                |  | Monthly |  |   | 1           | 2  | 3 4                                    | 5 | 6 | 7 | 8         | }         |  |  |  |
| •                     |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Name Lice  |  |         |  | ense Plate Number                                   |             |    | Employee's Phone #                     |   |   |   |           |           |  |  |  |
|                       |  |         |  |   |             |    |  |   |   |   |           |           |  |  |  |
| Employee's Email      |  |         |  | Would   | you like to | re | eceive the monthly Parking Newsletter? |   |   |   |           |           |  |  |  |
|                       |  |         |  | Yes   | Yes         |    |  |   |   |   |           |           |  |  |  |
| Permit Type           |  |         |  | If Monthly, how many months?                        |             |    |  |   |   |   |           |           |  |  |  |
| Annual                |  | Monthly |  |   | 1           | 2  | 3 4                                    | 5 | 6 | 7 | 8         | 3         |  |  |  |

| Employee's Name   | Lice  | License Plate Number                                 |  |                    | Employee's Phone # |    |   |   |          |          |  |  |
|-------------------|---|--|--|--------------------|--------------------|----|---|---|----------|----------|--|--|
|                   |   |  |  |                    |                    |    |   |   |          |          |  |  |
| Employee's Ema    | Would   | Nould you like to receive the monthly Parking Newsle |  |                    |                    |    |   |   |          | sletter? |  |  |
|                   | Yes   |  |  |                    |                    | No |   |   |          |          |  |  |
| Permit Type       |   | If Monthly, how many months?                         |  |                    |                    |    |   |   |          |          |  |  |
| Annual   Month    |   | 1  | 2                                      | 3                  | 4                  | 5  | 6 | 7 | 8        |          |  |  |
| Employee's Name   | ense Plat   |  | Employee's Phone #                     |                    |                    |    |   |   |          |          |  |  |
|                   |   |  |  |                    |                    |    |   |   |          |          |  |  |
| Employee's Ema    | Would   | you like to  | receive the monthly Parking Newsletter |                    |                    |    |   |   |          | sletter? |  |  |
|                   | Yes   |  | No 🗆                                   |                    |                    |    |   |   |          |          |  |  |
| Permit Type       |   |  | If Monthly, how many months?           |                    |                    |    |   |   |          |          |  |  |
| Annual   Month    | nly 🗆   |  | 1                                      | 2                  | 3                  | 4  | 5 | 6 | 7        | 8        |  |  |
| 5 1 1 1           |   | DI.  | _                                      |                    |                    |    |   |   |          |          |  |  |
| Employee's Name   | Lice  | ense Plat  |  | Employee's Phone # |                    |    |   |   |          |          |  |  |
|                   |   |  |  |                    |                    |    |   |   |          |          |  |  |
| Employee's Ema    | Would you like to receive the monthly Parking Newsletter? |  |  |                    |                    |    |   |   |          |          |  |  |
|                   | Yes 🗆 No 🗆  |  |  |                    |                    |    |   |   |          |          |  |  |
| Permit Type       | If Monthly, how many months?                              |  |  |                    |                    |    |   |   |          |          |  |  |
| Annual   Month    | nly 🗆   |  | 1                                      | 2                  | 3                  | 4  | 5 | 6 | 7        | 8        |  |  |
|                   |   |  |  |                    |                    |    | _ |   |          |          |  |  |
| Employee's Name   | ense Plate Number   |  |  | Employee's Phone # |                    |    |   |   |          |          |  |  |
|                   |   |  |  |                    |                    |    |   |   |          |          |  |  |
| Employee's Ema    | Would you like to receive the monthly Parking Newslette   |  |  |                    |                    |    |   |   | sletter? |          |  |  |
|                   | Yes   |  |  |                    |                    | No |   |   |          |          |  |  |
| Permit Type       | If Monthly, how many months?                              |  |  |                    |                    |    |   |   |          |          |  |  |
| Annual   Month    | nly 🗆   |  | 1                                      | 2                  | 3                  | 4  | 5 | 6 | 7        | 8        |  |  |
| (Office Use Only) |   |  |  |                    |                    |    |   |   |          |          |  |  |
| Total Cost: \$    | Receipt # :   |  |  |                    |                    |    |   |   |          |          |  |  |
| Verified By:      | Date:   |  |  |                    |                    |    |   |   |          |          |  |  |